## P17000072135

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ALMIGHT	TY GLASS INC.
DOCUMENT NUMBER: P17000072135	
The enclosed Articles of Amendment and fo	
Please return all correspondence concerning	
LESLY GARCIA	
	Name of Contact Person
ALMIGHTY GLAS	SINC.
	Firm/ Company
1602 SW 139 AVE	·
	Address
MIAMI, FL 33175	
	City/ State and Zip Code
GARCIALESLY94@YA	ноо,сом
F-mail address	: (to he used for future annual report notification)
For further information concerning this ma	
Name of Contact Person	at (786 ) 307-2815  Area Code & Daytime Telephone Number
• •	unt made payable to the Florida Department of State:
\$35 Filing Fee	g Fee & S43.75 Filing Fee & S52.50 Filing Fee  Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, Fl. 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



ALMIGHTY GLASS INC.

(Name of Corporation as current	tly filed with the Florida Dept. of State)
217000072135	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
<ol> <li>Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)</li> </ol>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
<ol> <li>If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address.</li> </ol>	ldress in Florida, enter the name of the
Name of New Registered Agent	
(Florido	street address)
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent.—I am familia	ent: ar with and accept the obligations of the position
Sionature of Ne	w Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; F= Treasurer; S= Secretary; D= Director; TR= Trustee, C = Chairman or Clerk; CEO - Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	<u>PT</u> .	John Doe	
X Remove	<u>V</u> ,	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	KEVIN LAMAS	1602 SW 139 AVE
X Add	<del></del>		MIAMI, FL 33175
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary)	ticles, enter cha . (Be specific)				
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If an amendment provides for an e	xchange, reclass	ification, or can	cellation of issue	d shares,	
nrovisions for implementing the a	mendment ii no	t contained in th	e amendment its	self:	
(if not applicable, indicate N/A	)				
					<del> </del>
	. — . — . –				
					<u></u>

	09/01/2017	, if other than the
The date of each amendment(s) a date this document was signed.	109/01/2017 10ption:	
_	01/2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more man yn adys aper tamenament fre date.)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmen ufficient for approval.	ıt(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
, <u></u>	(voting group)	
☐ The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareho	lder
The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
09/01/20 Dated	77.11	
Signature(By a	lirector, propident or other officer – if directors or officers have not be led, by an incorporator – if in the hands of a receiver, trustee, or other of	en
appo	inted fiduciary by that fiduciary)	
	LESLY GARCIA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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